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Bib Data Sheet

CONFIRMATION NO. 2194

<b>SERIAL NUMBER</b> 09/891,865	<b>FILING DATE</b> 06/25/2001 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> 2901/0J410
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**\*\* CONTINUING DATA \*\*\*\*\***  
 DS This application is a CON of PCT/EP99/10416 12/23/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
 ITALY MI 98 A 002792 12/23/1998  
*No priority doc submitted as of 6/24/04*  
 IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY ..  
 \*\* 08/08/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance DS Examiner's Signature Initials	<b>STATE OR COUNTRY</b> ITALY	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 2
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**ADDRESS**  
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 New York, NY 10022

**TITLE**  
 Recombinant bacterial strains for the production of natural nucleosides and modified analogues thereof

<b>FILING FEE RECEIVED</b> 436	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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